

Form 1040

Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status

Check only one box.

☐ Single ☒ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Your first name and middle initial

JAMES R

Last name

COMER

Your social security number

If joint return, spouse's first name and middle initial

TAMARA J

Last name

COMER

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

PO BOX 338

Apt. no.

City, town or post office. If you have a foreign address, also complete spaces below.

TOMPKINSVILLE

State

KY

ZIP code

42167

Foreign country name

Foreign province/state/county

Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

☐

You

☐

Spouse

At anytime during 2020, did you receive, sell, send, exchange, or otherwise acquire financial interest in any virtual currency?

Yes

☒

No

Standard Deduction

Someone can claim:

☐ You as a dependent☐ Your spouse as a dependent☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness

You:

☐ Were born before January 2, 1956☐ Are blind

Spouse:

☐ Was born before January 2, 1956☐ Is blind

Dependents (see instructions):

If more than four dependents, see instructions and check here ☐

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):
REAGAN F	COMER		DAUGHTER	Child tax credit <input checked="" type="checkbox"/> Credit for other dependents
HARLAN J	COMER		SON	<input checked="" type="checkbox"/>
ANISTON L	COMER		DAUGHTER	<input checked="" type="checkbox"/>

Attach Sch. B if required.

1 Wages, salaries, tips, etc. Attach Form(s) W-2

2a Tax-exempt interest

2a

3a Qualified dividends

3a

4a IRA distributions

4a

5a Pensions and annuities

5a

6a Soc. sec. ben.

6a

7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐

8 Other income from Schedule 1, line 9

9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income

10 Adjustments to income:

a From Schedule 1, line 22

b Charitable contributions if you take the standard deduction. See instructions

c Add line 10a and 10b. These are your total adjustments to income

11 Subtract line 10c from line 9. This is your adjusted gross income

12 Standard deduction or itemized deductions (from Schedule A)

13 Qualified business income deduction. Attach Form 8995 or Form 8995-A

14 Add lines 12 and 13

15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-

1	144,475
2b	154
3b	257
4b	
5b	
6b	
7	1,072
8	27,968
9	173,926
10a	6,000
10b	300
10c	6,300
11	167,626
12	24,800
13	
14	24,800
15	142,826

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

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16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 <input type="checkbox"/> 3	16	22,908
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	22,908
19	Child tax credit or credit for other dependents	19	6,000
20	Amount from Schedule 3, line 7	20	
21	Add lines 19 and 20	21	6,000
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	16,908
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	
24	Add lines 22 and 23. This is your total tax	24	16,908
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	16,039
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	16,039
26	2020 estimated tax payments and amount applied from 2019 return.	26	
27	Earned income credit (EIC)	27	
28	Additional child tax credit. Attach Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	3,292
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your total other payments and refundable credits	32	3,292
33	Add lines 25d, 26, and 32. These are your total payments	33	19,331
34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,423
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	2,423
b	Routing number		
c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	
37	Subtract line 33 from line 24. This is the amount you owe now Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.	37	
38	Estimated tax penalty (see instructions)	38	

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

Refund

Direct deposit?
See instructions

Amount You Owe

For details on how to pay, see instructions.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☒ Yes. Complete below. ☐ No

Designee's

name **JEFFERY P CARTER, CPA**

Phone

no.

Personal identification number

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return?
See instructions.
Keep a copy for your records.

Your signature

Date

Your occupation

MEMBER OF US HOUSE OF REP

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

HOUSEWIFE

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no.

Email address

Preparer's name

Preparer's signature

Date

PTIN

Check if:

Paid**JEFF P CARTER, CPA****JEFF P CARTER, CPA**

04/30/21

☐ Self-employed**Preparer Use Only**Firm's name **TAYLOR POLSON & CO, PSC**Phone no. **270-651-8877****101 MCKENNA ST**Firm's address **GLASGOW****KY 42141**Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2020)